

STATE OF MISSISSIPPI
COUNTY OF PIKE

84183

AFFIDAVIT OF HEIRSHIP
of
EMMA LEE BENTZ
A/K/A EMMA ELIZABETH BENTZ
AND
LAWRENCE WILLIAM BENTZ, JR.

TRACT 1:

Starting at the iron stake which marks the corner of Sections 11, 12, 13 and 14, Township 1 North, Range 7 East, Pike County, Mississippi, and running North 1200 feet to point of beginning; run thence West 150 feet; thence North 250 feet; thence East 150 feet; thence South 250 feet to point of beginning; making a tract of land 150 feet by 250 feet, all in the East Half of the Southeast Quarter of Section 11, Township 1 North, Range 7 East, Pike County, Mississippi.

TRACT 2:

That part of the West side of the W 1/2 of the SW 1/4 of Section 12, Township 1 North, Range 7 East, Pike County, Mississippi, described as follows: Begin at a stake on Section line of Section 12, located on the West side of the Osyka-Magnolia Highway, at the North side of the bridge which is just North of the Convent or the property of St. Mary of the Pines, and run in an Easterly direction along the North side of the branch 662 feet; thence run in a Northerly direction 218 feet to the lands of Henry Scott; thence run in a Northwesterly direction 728 feet to West side of Osyka-Magnolia highway, joining line Section 12, thence along the West side of said Highway and in a southerly direction 662 feet to point of beginning.

TRACT 3:

A parcel of land situated in the Western edge of the Southwest Quarter (SW 1/4) of the Southeast Quarter (SE 1/4) of Section 11, Township 1, Range 7 East, and more particularly described as follows: Beginning at a stake 330 feet North of the Southwest corner of Southeast Quarter, Section 11, Township 1, Range 7 East, running from thence North 175 feet to a stake, thence East 190 feet, more or less, to the Tangipahoa River, thence, South along the wanderings and meanderings of the said Tangipahoa River 175 feet, more or less, thence West 190 feet, more or less, to the point of beginning.

ALSO, that parcel of land lying and situated East of the right of way of the Illinois Central Railroad described as follows: Beginning at the Southwest corner of the Southwest Quarter of the Southeast Quarter of Section 11, Township 1 North, Range 7 East, and run thence North 330 feet, more or less to the point of beginning; run thence West 26 feet, more or less, to the right of way of the Illinois Central Railroad; run thence North 175 feet; run thence East 26 feet more or less; run thence South 175 feet to the point of beginning; and being a strip of land 26 feet East and West by 175 feet North and South in the SW 1/4 of the SW 1/4 of Section 11, Township 1 North, Range 7 East, Pike County, Mississippi.

INDEXING INSTRUCTIONS:

Index in the E 1/2 of SE 1/4, the SE 1/4 of SW 1/4 and SW 1/4 of SE 1/4 of Section 11, Township 1 North, Range 7 East, Pike County, Mississippi, and

Index in the W 1/2 of the SW 1/4 of Section 12, Township 1 North, Range 7 East, Pike County, Mississippi.

Street Address
243 Louisiana Avenue
McComb, Mississippi 39648

601-684-4841
Fax: 601-684-4876

Post Office Box 1844
McComb, Mississippi 39648

G. Terrell Morgan
Attorney at Law

Malony Address

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PERSONALLY APPEARED BEFORE ME, the undersigned Notary Public in and for the State and County aforesaid, the undersigned, HARRY FRERICHS, JR. and KLIS NORMAND VIELEE, adults, who, after being duly sworn on their respective oaths, state:

1. That they were personally acquainted with and knew EMMA LEE BENTZ a/k/a EMMA ELIZABETH BENTZ and her son LAWRENCE WILLIAM BENTZ, JR. during their lifetimes, and that they are well acquainted with the family and near relatives of both decedents and with all those who would under the laws of the State of Mississippi be their heirs, and that the following statements are true and correct based upon the personal knowledge of the affiants.
2. That EMMA LEE BENTZ a/k/a EMMA ELIZABETH BENTZ departed this life intestate on March 26, 1983, while she was a resident of Los Angeles, California.
3. That EMMA LEE BENTZ a/k/a EMMA ELIZABETH BENTZ was married once, and then to LAWRENCE WILLIAM BENTZ, SR., and that LAWRENCE WILLIAM BENTZ, SR. died on April 11, 1973.
4. That five children were born unto Emma Lee Bentz a/k/a Emma Elizabeth Bentz, i.e.

A CHILD WHO DIED AS AN INFANT
LAWRENCE WILLIAM BENTZ, JR.
MARTIN P. BENTZ
MARGARET BENTZ BURR
CHARLES A. BENTZ
5. That at the time of her death on March 26, 1983, EMMA LEE BENTZ a/k/a EMMA ELIZABETH BENTZ left as her only heirs at law, four children, i.e.

LAWRENCE WILLIAM BENTZ, JR..
MARTIN P. BENTZ
MARGARET BENTZ BURR
CHARLES A. BENTZ
6. That subsequent to the death of Emma Lee Bentz a/k/a Emma Elizabeth Bentz, her son, LAWRENCE WILLIAM BENTZ, JR. died on January 17, 1995, at the age of 74 years, while a resident of LaPlace, Louisiana.
7. That LAWRENCE WILLIAM BENTZ, JR. had been predeceased by his wife, Kathleen Pick Bentz who died on April 23, 1987.
8. That one child was born unto LAWRENCE WILLIAM BENTZ, JR., i.e. SANDRA BENTZ who is now known as SANDRA BENTZ WILLIAMS.

WITNESS OUR SIGNATURES on this, the 18th day of May 1995.

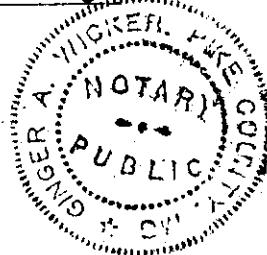
ATURES, on this, the 75 day of May

HARRY ERICHS, JR.

KLIS NORMAND VIELEE

SWORN TO AND SUBSCRIBED BEFORE ME, on this, the 18th day of May 1995.

Ginger A.
NOTARY PUBLIC



My Commission Expires: 10-18-98

STATE OF MISSISSIPPI
COUNTY OF PIKE

PERSONALLY APPEARED BEFORE the undersigned authority in and for the State and County aforesaid, HARRY FRERICHS, JR. and KLIS NORMAND VIELEE of lawful age, being first duly sworn, upon their oaths state: that the information given in the above and foregoing affidavit is true and correct to their personal knowledge.



HARRY FRERICHS, JR.



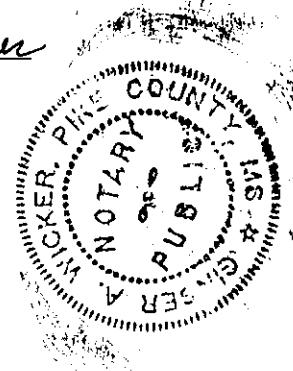
KLIS NORMAND VIELEE

KLIS NORMAND VIELEE

SWORN TO AND SUBSCRIBED BEFORE ME, on this, the 18th day of May 1995.



Ginger A. Wicker
NOTARY PUBLIC



My Commission Expires:

10-18-98

Prepared by:
G. TERRELL MORGAN
Attorney at Law
P.O. Box 1344
249 Louisiana Avenue
McComb, Mississippi 39648
(601) 684-4841
MS State Bar No. 3475



RECEIVED
Pike County Chancery Court
MS. 1995-05-18
SEARCHED
INDEXED
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NOTARIZED
18 MAY 20 1995
95 JUN 20 AM 11:43

STATE OF MISSISSIPPI
PIKE COUNTY
CHANCERY COURT
I CERTIFY THIS PAPER IS TRUE
AND CORRECT
18 MAY 20 1995
95 JUN 20 AM 11:43

Mailing Address

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39, 697

**STATE OF MISSISSIPPI
CERTIFICATE OF DEATH**

LOCAL FILE NUMBER		FIRST		MIDDLE		LAST		SEX	STATE FILE NUMBER		DATE OF DEATH (MONTH, DAY, YEAR)		
DECEASED—NAME								MALE			APRIL 11 th , 1973		
RACE WHITE, NEGRO, AMERICAN INDIAN, Etc. (SPECIFY)		AGE—LAST BIRTHDAY (YEARS)		UNDER 1 YEAR MOS. DAYS		UNDER 1 DAY HOURS MIN.		DATE OF BIRTH (MONTH, DAY, YEAR)	COUNTY OF DEATH				
WHITE		76		36		31		12-24-1896	PIKE				
CITY, TOWN, OR LOCATION OF DEATH		INSIDE CITY LIMITS SPECIFY YES OR NO		HOSPITAL OR OTHER INSTITUTION—NAME IF NOT IN EITHER, GIVE STREET AND NUMBER									
7a. MAGNOLIA,		7b. YES		7c. BEACHAM'S MEMORIAL HOSP.									
DECEASED:		STATE OF BIRTH (IF NOT IN U.S.A., NAME COUNTRY)		CITIZEN OF WHAT COUNTRY		MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY)		SURVIVING SPOUSE (IF WIFE, GIVE MAIDEN NAME)					
8. MISSISSIPPI		9. U. S. A.		10. MARRIED		11. MARRIED		12. MRS. EMMA LEE MARTIN (Bentz)					
USUAL RESIDENCE WHERE DECEASED LIVED. IF DEATH OCCURRED IN INSTITUTION, GIVE RESIDENCE BEFORE ADMISSION.		SOCIAL SECURITY NUMBER		USUAL OCCUPATION (GIVE KIND OF WORK DONE DURING MOST OF WORKING LIFE, EVEN IF RETIRED)		KIND OF BUSINESS OR INDUSTRY							
13. 427-10-6298		14. 427-10-6298		15a. POSTMASTER & MERCHANT		15b. POST OFFICE & MERCHANT							
RESIDENCE—STATE		COUNTY		CITY, TOWN, OR LOCATION		INSIDE CITY LIMITS SPECIFY YES OR NO		STREET AND NUMBER					
16. MISS.		17. PIKE		18. CHATAWA,		19. NO		20. NO					
FATHER—NAME		MIDDLE		LAST		MOTHER—MAIDEN NAME		FIRST		MIDDLE		LAST	
21. MR. JOHN		L.		BENTZ		22. NELLIE		WARD				(Bentz)	
INFORMANT—NAME		MAILING ADDRESS										(STREET OR R.F.D. NO., CITY OR TOWN, STATE, ZIP)	
23. MRS. LAWRENCE WILLIAM BENTZ		24. CHATAWA, MISSISSIPPI											
PART I. DEATH WAS CAUSED BY:						(ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c))						APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH	
11. IMMEDIATE CAUSE						12. <i>Acute Granulocytic Leukemia</i>						6 mos.	
COMPLICATIONS, IF ANY, WHICH GAVE RISE TO IMMEDIATE CAUSE (11), STATING THE UNDER- LYING CAUSE LAST		(a) DUE TO, OR AS A CONSEQUENCE OF:											
		(b) DUE TO, OR AS A CONSEQUENCE OF:											
		(c)											
PART II. OTHER SIGNIFICANT CONDITIONS: CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I (10)												AUTOPSY YES OR NO	
ACCIDENT, SUICIDE, HOMICIDE, OR UNDETERMINED (SPECIFY)		DATE OF INJURY (MONTH, DAY, YEAR)		HOUR		HOW INJURY OCCURRED (ENTER NATURE OF INJURY IN PART I OR PART II, ITEM 18)						IF YES WERE FINDINGS CON- SIDERED IN DETERMINING CAUSE OF DEATH YES NO	
20a.		20b.		20c.		20d.							
INJURY AT WORK SPECIFY YES OR NO		PLACE OF INJURY AT HOME, FARM, STREET, FACTORY, OFFICE BLDG., ETC. (SPECIFY)		LOCATION		(STREET OR R.F.D. NO., CITY OR TOWN, STATE)							
20e.		20f.		20g.									
CERTIFICATION— PHYSICIAN: <i>4/11/73</i> TO <i>4/11/73</i>		MONTH DAY YEAR		MONTH DAY YEAR		AND LAST SAW HIM/HER ALIVE ON MONTH DAY YEAR		I DID/DID NOT VIEW THE BODY AFTER DEATH, MONTH DAY YEAR		DEATH OCCURRED AT THE PLACE, ON THE DATE, AND, TO THE BEST OF MY KNOWLEDGE, DUE TO THE CAUSE(S) STATED			
21a. DECEASED FROM 21b. DECEASED FROM		21c.		21d.		21e.		21f.		21g.			
CERTIFICATION—MEDICAL EXAMINER OR CORONER: ON THE BASIS OF THE EXAMINATION OF THE BODY AND/OR OF THE INVESTIGATION, IN MY OPINION, DEATH OCCURRED ON THIS DATE AND DUE TO THE CAUSE(S) STATED.						HOUR OF DEATH		THE DECEDENT WAS PRONOUNCED DEAD					
22a.		22b.		22c.		22d.		22e.		22f.			
CERTIFIER—NAME (TYPE OR PRINT)		SIGNATURE		OCCUP. OR TITLE		DATE SIG'D (MONTH, DAY, YEAR)							
23a. MAILING ADDRESS—CERTIFIER 23b.		23c.		23d.		23e.		23f.		23g.			
24a. BURIAL, CREMATION, REMOVAL SPECIFY		24b. CEMETERY OR CREMATORIAL NAME		24c. LOCATION		24d. CITY OR TOWN		24e. STATE		24f.			
24a. BURIAL DATE <i>4-14-1973</i>		24b. CHATAWA CEMETERY		24c. CHATAWA, MISSISSIPPI									
24a. BURIAL EMBALMER'S SIGNATURE 24b.		24c. FUNERAL HOME—NAME AND ADDRESS HARTMAN FUNERAL HOME, P.O. BOX 824, McCOMB, MISS-39648		24d. REGISTRAR—SIGNATURE									
24a.		24b.		24c.		24d.		24e.		24f.		DATE RECEIVED BY LOCAL REGISTRAR	
24a.		24b.		24c.		24d.		24e.		24f.			

CERTIFICATE OF DEATH
STATE OF CALIFORNIA

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LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER

DECEDENT PERSONAL DATA		1. NAME OF DECEDENT—FIRST Emma	1B. MIDDLE Elizabeth	1C. LAST Bentz	2A. DATE OF DEATH (MONTH, DAY, YEAR) March 26, 1983	2B. HOUR 2359								
3. SEX Female		4. RACE White	5. ETHNICITY MS	6. DATE OF BIRTH October 29, 1900	7. AGE 82	8. IF UNDER 1 YEAR MONTHS DAYS	9. IF UNDER 24 HOURS HOURS MINUTES							
10. BIRTHPLACE OF DECEDENT (STATE OR FOREIGN COUNTRY) U. S. A.		11. NAME AND BIRTHPLACE OF FATHER Charles A. Martin - MS			12. CITIZEN OF WHAT COUNTRY U. S. A.			13. SOCIAL SECURITY NUMBER 426-88-3103	14. MARITAL STATUS Widowed	15. PRIMARY OCCUPATION Housewife	16. NUMBER OF YEARS THIS OCCUPATION 62	17. EMPLOYER (IF SELF-EMPLOYED, SO STATE) Self	18. KIND OF INDUSTRY OR BUSINESS Own Home	
19A. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER OR LOCATION) 15080 E. Danbrook Drive		19B.			19C. CITY OR TOWN Whittier									
19D. COUNTY Los Angeles		19E. STATE CA			20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP Martin P. Bentz									
21A. PLACE OF DEATH Whittier Medical Center		21B. COUNTY Los Angeles			21C. STREET ADDRESS (STREET AND NUMBER OR LOCATION) 15151 Janine Drive			21D. CITY OR TOWN Whittier	21E. APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH 82 - 7901					
22. DEATH WAS CAUSED BY: IMMEDIATE CAUSE CONDITIONS, IF ANY, WHICH GAVE RISE TO THE IMMEDIATE CAUSE, STATING THE UNDERLYING CAUSE LAST (A) <i>Arteriosclerotic Cardiovascular Disease</i> DUE TO, OR AS A CONSEQUENCE OF (B) DUE TO, OR AS A CONSEQUENCE OF (C)								24. WAS DEATH REPORTED TO CORONER? No						
23. OTHER CONDITIONS CONTRIBUTING BUT NOT RELATED TO THE IMMEDIATE CAUSE OF DEATH					27. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEMS 22 OR 23? TYPE OF OPERATION No			25. WAS BIOPSY PERFORMED? No						
28A. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED. I ATTENDED DECEASED SINCE I LAST SAW DECEASED ALIVE (ENTER MO. DA. YR.)		28B. PHYSICIAN—SIGNATURE AND DEGREE OR TITLE G. C. Lien, Deputy Coroner			28C. DATE SIGNED 3/28/83			28D. PHYSICIAN'S LICENSE NUMBER 4634						
29. SPECIFY ACCIDENT, SUICIDE, ETC. Shipped		30. PLACE OF INJURY 31 Mar 1983			31. INJURY AT WORK			32A. DATE OF INJURY—MONTH, DAY, YEAR 32B. HOUR						
33. LOCATION (STREET AND NUMBER OR LOCATION AND CITY OR TOWN) St. Mary of the Pipes, Chatawa, MS		34. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY) 35A. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED, AS REQUIRED BY LAW. I HAVE HELD AN INVESTIGATION.			35B. CORONER—SIGNATURE AND DEGREE OR TITLE G. C. Lien, Deputy Coroner			35C. DATE SIGNED 3/28/83						
36. DISPOSITION Burial		37. DATE—MONTH, DAY, YEAR March 29, 1983		38. NAME AND ADDRESS OF CEMETERY OR CREMATORIUM St. Mary of the Pipes, Chatawa, MS		39. EMBALMER'S LICENSE NUMBER 4634		40. NAME OF FUNERAL DIRECTOR (FOR PERSON ACTING AS SUCH) White-Emerson Mortuary F-217			41. LOCAL REGISTRAR Robert L. Bentz		42. DATE ACCEPTED BY LOCAL REGISTRAR MAR 28 1983	
STATE REGISTRAR VS-11 (10-78)		A.		B.		C.		D.		E.		F.		

This is a true certified copy of the record
filed in the County of Los Angeles Department
of Health Services in 7 years this seal is
purple ink.



MAR 26 1983

County of Los Angeles and Registrar

MARCH 26 1983